

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**10/537392**

FILING DATE

**Winston Alvarez**  
**National Stage Processing**  
**Paralegal Specialist**  
**(703) 305-8421**

APPLICANT(S)

**Winston Alvarez**

**CLAIMS**

**National Stage Processing**  
**Paralegal Specialist**  
**(703) 305-8421**

	AS FILED IND. DEP.	AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
		IND.	DEP.	IND.	DEP.
1	/	/			
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TOTAL IND.	3	3			
TOTAL DEP.	15	15			
TOTAL CLAIMS	18	18			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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